

(DETACH AND RETAIN THIS BEFORE DEPOSITING CHECK)

OX 7 5121
Just say cash is ready to
be picked up in Ins. Branch
(use no name) GOVERNMENT EMPLOYEES HEALTH ASSOCIATION
REMITTANCE STATEMENT

In payment of the following under policy number 139 :

Claim Other (explain): _____
Premium Refund _____

KIND OF POLICY:

Mutual Hospitalization Specified Diseases Remarks: In order to consider blood
United Benefit Life Ins. Income Replacement test at hospital and Dr. Didner's bill,
WAEPA Life Insurance Emergency Travel Plan we will need itemized bills.
Travel-Matic Insurance CONTRACT HOSP
(OTHER) _____

Hospitalized _____ thru _____ (DATE) _____ (DATE)

Hospital Room _____ days @ \$ _____ (actual \$ _____) \$ _____)

Hospital Extras _____ (actual \$ _____) \$ _____)

Doctor's Fee _____ (actual \$ _____) \$ _____)

TOTAL \$ _____

THIS COPY SHOULD BE RETAINED FOR INCOME TAX PURPOSES

Received. Mario Goordano
18 April '67

DECLASSIFIED AND RELEASED BY
CENTRAL INTELLIGENCE AGENCY
SOURCES METHOD EXEMPTION 3828
NAZI WAR CRIMES DISCLOSURE ACT
DATE 2006